



“Best Practice”: What’s It All About?

From Challenges to Opportunities
Best Start Annual Conference, 2005

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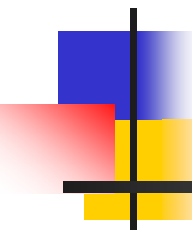
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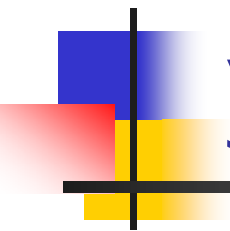
Outline of Presentation:

- Background to best practices in health promotion
- Identifying and assessing best practices: examples from our International Review of Best Practices in CVD and type 2 diabetes prevention
- The challenges
- The opportunities

What does “Best Practices”
mean to you?



How do you think that “Best Practices” might be helpful to you in your work?



Why best practices in health promotion?



- An attempt to help practitioners, decision makers to distill the 'explosion' of information
- Stemmed from the evidence-based practice movement
 - ↑ reviews, practice guidelines, position papers
- Aims to:
- Identify not only the content, e.g. principles behind practice (as in practice guidelines/ standards of practice)
- But also 'what works' in different practice settings
- Foster knowledge exchange between researchers and decision makers
- Identify research needs



What are 'Best Practices'?

- There is no one accepted definition
- “Initiatives that have been assessed as being effective and worthy of replication” Desmeules 2004
- OR existing programs that could adopted as is or easily modified
- “best practices is the continual process of reflecting on how to improve and enhance our health promotion practice”

www.hearthealth.ns.ca/hpc/best_practices.htm



What are 'Best Practices'?

- “Best practices in health promotion are those sets of processes and activities that are consistent with health promotion values/ goals/ ethics, theories / beliefs, evidence, and understanding of the environment that are most likely to achieve health promotion goals in a given situation”
(Kahan & Goodstadt, 2001)



Best Practices Terminology

- “best practices” (promising practices, weak practices) may not be the ideal term
- Others have used or suggested
 - “better practices”
 - “recommended practices”
 - “doing things in a good way”



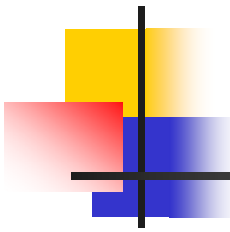
Elements of the 'Best' Practice Process

- Setting the Framework
- Identifying
 - Context
- Assessing
 - Effectiveness, impact
 - Evidence and research
- Synthesizing
- Disseminating: Knowledge Exchange / Knowledge Translation

IDM Model of Best Practices in Health Promotion

Barbara Kahan, Michael Goodstadt

- Considers:
- the traditional research evidence and evaluation elements
- health promotion underpinnings, e.g. values, goals, ethics, theories, concepts, underlying beliefs, assumptions
- Environment (physical, socio-cultural, political, economic)
- www.idmbestpractices.ca, www.bestpractices-healthpromotion.com, francophone adaptation:
<http://www.opc.on.ca/francais/nosprogrammes/centre/projets/meilleurespratiques.htm>



A 'Best Practices' identification and assessment process: the University of Waterloo Experience

- Examples from our Projects:
- International Best Practices in Cardiovascular Health Promotion and Stroke Prevention
- International Best Practices in Type 2 Diabetes Prevention
- www.ahs.uwaterloo.ca/~hbr/projects/
- With the Ontario Heart Health Resource Centre, OPHA, www.hhrc.net



UWaterloo Projects: Goal

Building on earlier work from our group on Best Practices in:

- heart health promotion (Cameron et al, Health Promotion Practices, 01)
- smoking cessation (Manske et al, Am J Health Promotion, 04)

The projects aimed to identify effective multi-risk factor programs in the prevention of CVD and Type II diabetes relevant to Canadian communities

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Director

Public Health Association – Nova Scotia



UWaterloo Project Approach

- **Target:**
 - Community-oriented programs for 1° prevent of CVD or Type 2 Diabetes that addressed more than one risk factor, e.g.
 - **Nutrition**
 - **Physical activity**
 - **Obesity**
 - **Smoking**

- **Approach:**
 - Systematic Literature Review

 - Scan of Practices Nominated by Key Informants

Search Strategy – Literature Review



- **Search engines:** ERIC, PubMed, Web of Science (includes: Social Sciences, Science Citation Index), General Sciences Abstracts
- Hand search of selected journals (11)
- **Limits on all searches:**
 - English language
 - 1° Journal Article or Review
 - 1997-present
 - human
 - North America, Europe, Australia / New Zealand



Literature Search Strings

- 1 - **Condition and [Program or Design]**
- 2 - **Risk Factors** and [Program or Design]
- 3 - Condition and **Determinants of Health (SES)** and [Program and Design]
- 4- Condition and **Determinants of Health (Personal Health Practices)** and [Program and Design]
- 5 - Condition and **Determinants of Health (Health Services)** and [Program and Design]

E.g. Key Words

Search String 1 - Condition and [Program or Design]

Condition		Program		Design
<p>diabetes and type 2 or type II diabetes and non-insulin dependent pre-diabetes pre-diabetic borderline diabetes borderline diabetic glucose</p>	<p>and</p>	<p>program prevent prevention intervention media project strategy campaign class website mass communication health promotion community multidisciplinary</p>	<p>or</p>	<p>strategy initiative approach</p>



Scan

- Key Informants
- → Nominated Practices
 - Programs contacted by e-mail, phone
- Eligible programs completed an electronic survey
- Provided program publications & materials



Review

By at least 2 independent reviewers at each stage

- Screen re inclusion criteria
 - title, abstract, paper
 - survey
- Rate strength of evidence
 - Strong, moderate, weak
- Rank plausibility
 - Strong, moderate, weak
- Describe practicality
- Meeting of reviewers to discuss ratings →
Best, Promising, Weak or To Be Tracked

Elements of 'Best Practices': Quality

- Most BP reviews focus on the quality of the individual studies that have been identified
- Traditional evidence based reviews, e.g. the Cochrane Collaboration, have focused mainly on RCTs and strong experimental study designs

CHALLENGE

- Increasing call to examine the 'gray' literature
 - Technical reports, web sources, non-RCTs
- To find ways of evaluating qualitative, non-experimental approaches
- To consider unexpected outcomes as well as the expected



Strength of Evidence Criteria

- There is currently no one set of accepted BP criteria
- PHRED www.city.hamilton.on.ca/phcs/EPHPP
 - Selection Bias
 - Allocation Bias
 - Confounders
 - Blinding
 - Data Collection Methods
 - Withdrawals and Drop-outs
 - Analysis
 - Intervention Integrity



Plausibility Criteria

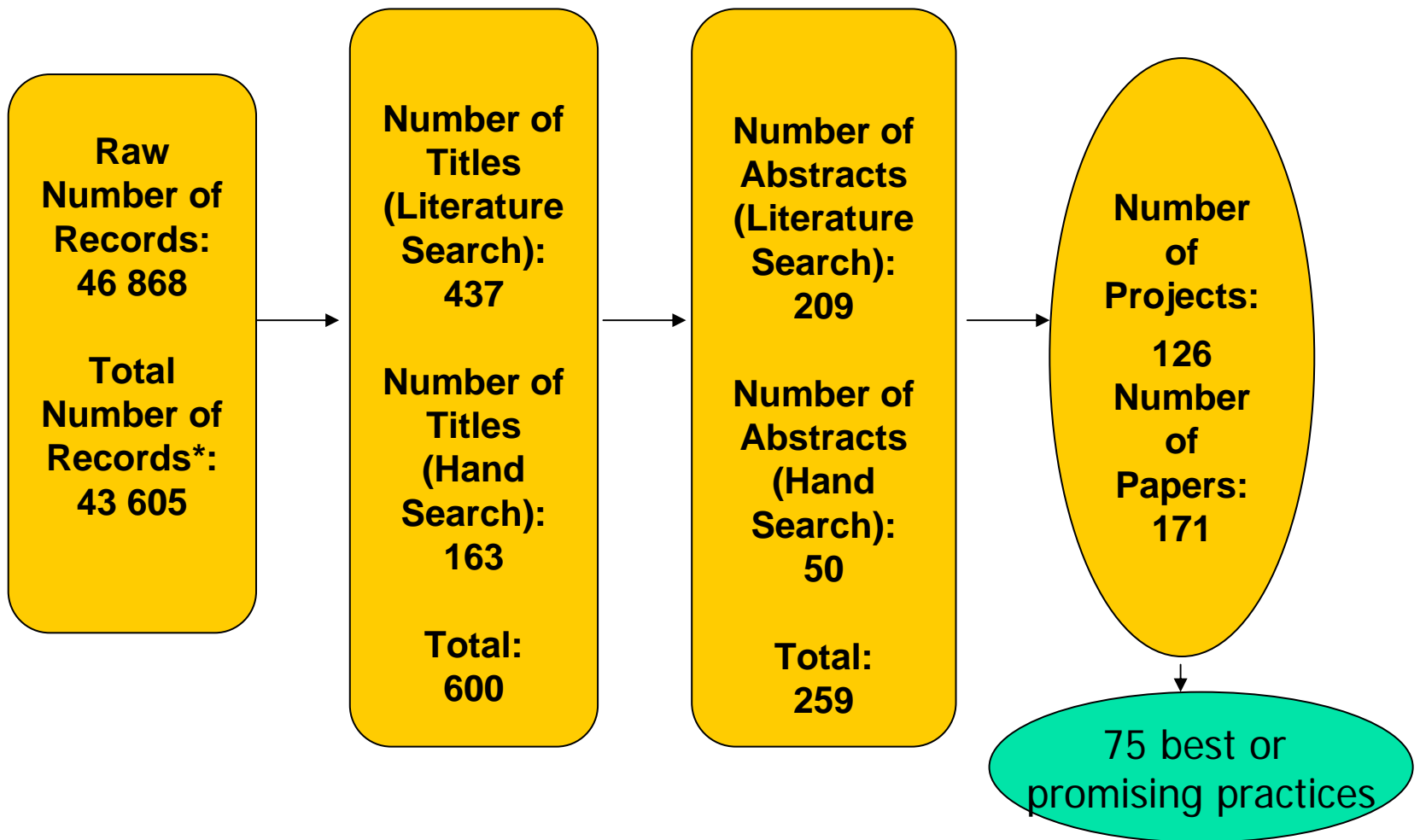
- Evaluation
 - Formative Evaluation / Pilot Testing
 - Process Evaluation
- Content Attributes
 - Supports specific behavioural objective(s)
 - Behaviour change principles incorporated



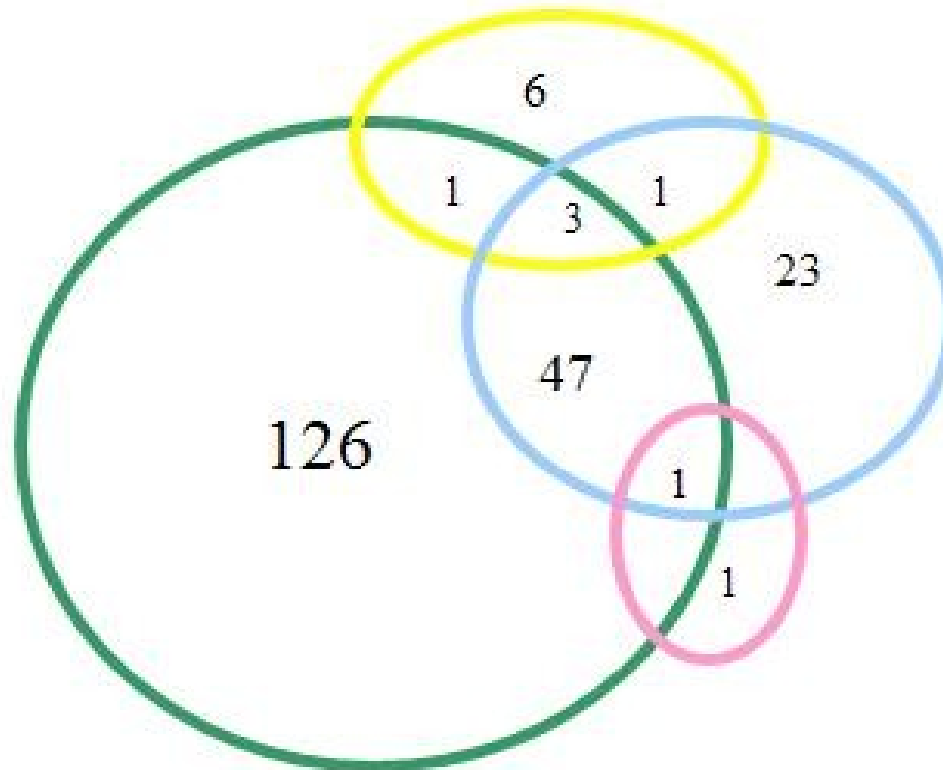
Practicality


- Process Attributes
 - Collaborative approach, visibility, sustainability, community leader support, mobilizes community resources
- Cost Effectiveness
 - Startup cost, ongoing implementation cost, reach
- Availability
- Fit
 - Supportability, generalizability, adaptability, expertise required, linguistic accessibility, evaluability


Literature Search Results



Overlap of Abstracts



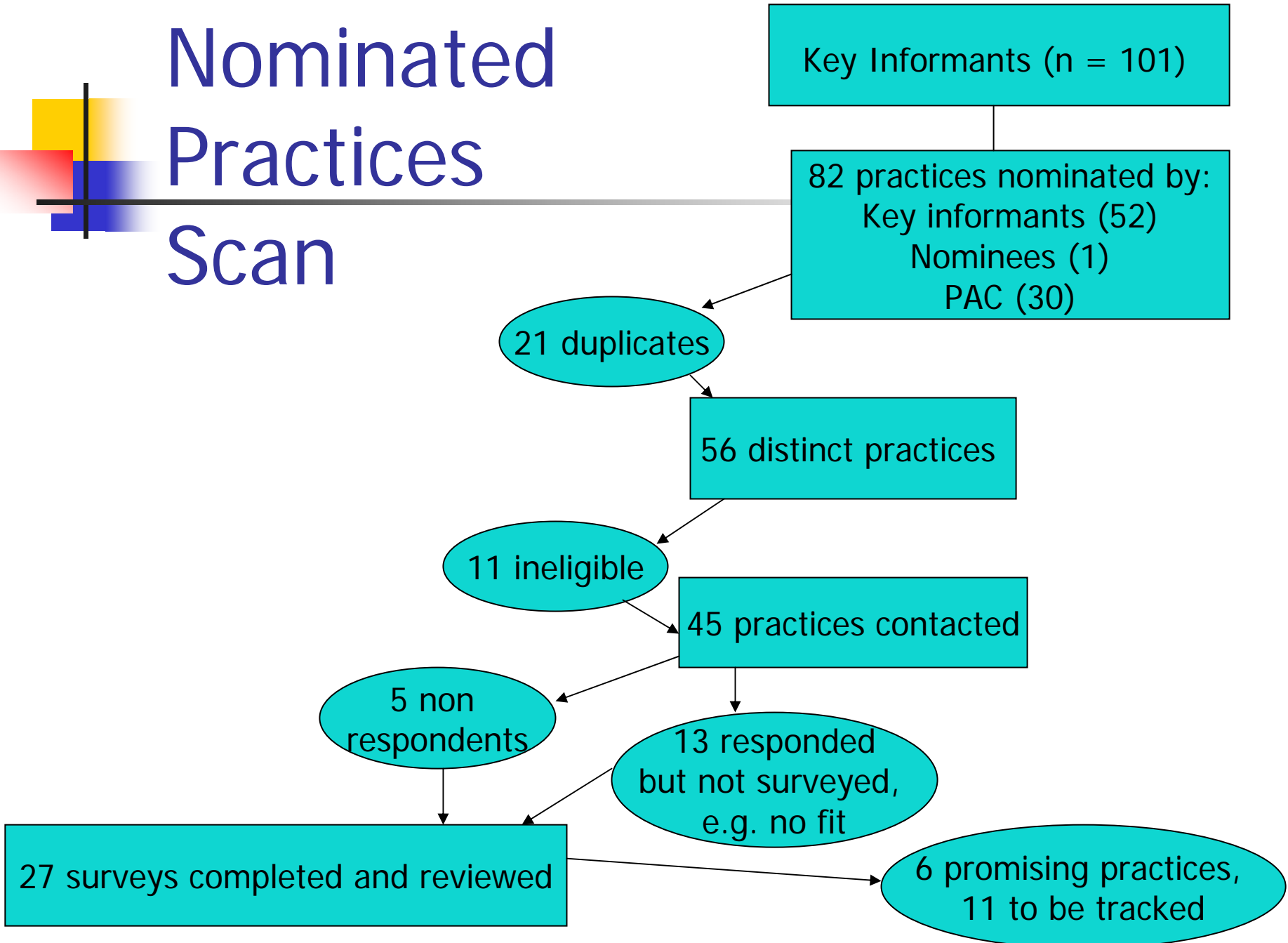
 - PubMed

 - Web of Science

 - General Science Abstracts

 - ERIC

Nominated Practices Scan





Practices Identified by Channel

Channel	Best	Promising	To Be Tracked
Aboriginal	1	8	1
African American	2	2	
Community	2	19	3
Schools	7	8	4
Women	1	6	1
Worksites	2	8	
Scan		6	11



Comparing Literature Review and Scan

- Literature (75)
 - Large, well funded, multi-centre trials
 - Strong study design
 - Positive outcomes re physical or behavioural factors
 - 8% of practices from Canada
 - Multiple publications
- Scan (17)
 - Single community based
 - Innovative, grass roots initiatives
 - Strong plausibility
 - No evaluation to date or process evaluation only
 - 80% of practices from Canada
 - 80% without publications



Lessons Learned from Effective Interventions

Hanning 2005

- Employ a participatory approach
- Tailor interventions and resources to the target population
- Focus on changing behaviours
- Encompass environmental change
- Incorporate policy at all levels



Lessons Learned from Effective Interventions

Hanning 2005

- Enhance capacity to provide individualized services
- Enhance capacity to provide intensive programs
- Enhance capacity to provide access to trained service providers



Lessons Learned from Effective Interventions

Hanning 2005

- Take advantage of multiple communications strategies
- Invest in high visibility
- EVALUATE



Next Steps:

- Results have been summarized by channel
- Each individual 'best' and 'promising' practice has been summarized
- See <http://www.uwaterloo.ca/~hbr/projects/>
- Methodology is being evaluated (B. Rush)
- Dissemination to practitioners, policy-makers, researchers
 - Building on framework of N. Dubois et al
 - & dissemination plan (K. Skinner & S. Manske)
 - The Heart Health Resource Centre OPHA has received a grant to support dissemination in communities
www.hhrc.net

Dissemination Dubois et al, www.hhrc.net

http://www.hhrc.net/pdfs/illustration.pdf - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address Links

Heart Health Resource Centre
 Centre de ressources - **Coeur en santé**
 L'ONTARIO PUBLIC HEALTH ASSOCIATION
 L'ASSOCIATION POUR LA SANTÉ PUBLIQUE DE L'ONTARIO

A FRAMEWORK FOR ENHANCING THE DISSEMINATION OF BEST PRACTICES

COMPONENTS	KNOWLEDGE DEVELOPMENT	KNOWLEDGE TRANSMISSION	KNOWLEDGE UPTAKE/DEVELOPMENT
TARGET GROUP	KNOWLEDGE DEVELOPERS → KNOWLEDGE BROKERS → ADOPTERS INPUT & FEEDBACK		
OUTPUTS PRODUCT	EVIDENCE-BASED RESULTS TAILORED TO AUDIENCE(S)	STRATEGIC DISSEMINATION PLAN TAILORED TO AUDIENCE(S) FOR EACH RESOURCE	IMPLEMENTATION PLANS THAT INCLUDE THE EVIDENCE-BASED APPROACHES
KEY CHARACTERISTICS	<p>SOURCE</p> <ul style="list-style-type: none"> source seen as credible to broker & adopter someone from the research team is available to the adopter for support needs work closely with brokers/adopters to understand & account for adopter needs in developing the research agenda, project, focus on-going familiarity/relationship with adopter an appropriate research design used that is based on evolving standards of evidence in applied health promotion research <p>INFORMATION</p> <ul style="list-style-type: none"> content & timing relevant to the adopter addresses the relative advantage of the best practice for the adopter as compared to previous practices strong evidence included to support the content content is framed in terms appropriate to adopter amount, type & format of information is tailored for specific adopters accessible in a variety of formats & locations 	<p>SOURCE</p> <ul style="list-style-type: none"> trusted as a credible source by adopter trusted with the knowledge by the developer knows the relevant needs & context of the adopter support tailored sharing of information within formal & informal communities of practice dissemination plan established <p>INFORMATION</p> <ul style="list-style-type: none"> material released & promoted when relevant to adopter information shared in multiple accessible formats & channels dissemination format & channels tailored to the needs of the adopter products are marketed to the potential adopter using messages & channels specific to the adopter 	<p>SOURCE</p> <ul style="list-style-type: none"> adopter is exposed to the availability of the information through a variety of sources opinion leaders promote the information incentives relative to the adopter have been provided information available at low or no financial cost to the adopter <p>INFORMATION</p> <ul style="list-style-type: none"> content positioned with a tailored relative advantage to adopter content is presented in an easy-to-understand format such that complexities are reduced lessons learned include what didn't work well evidence of the effects of the initiative are relative to the adopter implementation details are available

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Aggregated Evidence

- Best Practices processes also exist for examining aggregated evidence, e.g.
 - Meta-analysis
 - Reviews of reviews



CHALLENGES for the Best Practices Field

- Coordination of effort
- Consensus re terminology, methodology
- Expansion into areas where there are currently few summaries
- More work on knowledge exchange / transfer / utilization



OPPORTUNITIES in BP

- National Best Practices Consortium for Chronic Disease Prevention and Control has been formed.
- Conference: "Best Practices at Home & Abroad making health promotion decisions for the best results. Sept 20, 2004. Victoria College, Toronto
- International Workshop on the National Best Practices Consortium for Chronic Disease Prevention and Control. Public Health Agency of Canada, March 10-11, Toronto
- Refining Tools
- Dissemination



'Best Practices" Activity in Health Promotion in Canada

Canadian Task Force on Preventive Health Care

<http://www.ctfphc.org>

(includes prenatal and perinatal preventive care)

- Centre for Health Promotion, University of Toronto
www.utoronto.ca/chp/bestp.html
 - IDM (Kahan & Goodstadt)
- Chronic Disease Prevention Alliance of Canada (CDPAC) www.cdpac.ca
- Canadian Cochrane Network and Centre
www.cochrane.mcmaster.ca OR
- Cochrane health promotion and public health field
www.vichealth.vic.gov.au/cochrane/ (includes handbook)



'Best Practices" Activity in Health Promotion in Canada

- Health Canada, e.g. tobacco www.hc-sc.gc.ca/fnihb/cp/tobacco/building-best.htm#evidence
- Heart Health
 - Nova Scotia including framework http://hpclearinghouse.ca/best_practices.htm
- Heart Health
 - Ontario www.hhrc.net
- Nutrition Resource Centre, Ontario www.nutritionrc.ca



'Best Practices" Activity in Health Promotion in Canada

- Program Training & Consultation Centre (PTCC) – Tobacco www.ptcc-cfc.on.ca/bpt/bpt-meth.cfm#pdfc
- Public Health Agency of Canada www.phac-aspc.gc.ca/
- Public Health Research, Education and Development (PHRED)- Effective Public Health Practice Project www.city.hamilton.on.ca/phcs/EPHPP
- Reviews include:
 - antenatal education for childbirth and parenthood,
 - child pedestrian safety,
 - effectiveness of daycare infection control interventions,
 - effectiveness of interventions to promote healthy eating in preschool children aged 1 – 5y,
 - effectiveness of parenting groups with professional involvement in improving parent and child outcomes,
 - effectiveness of preschool screening for hearing, speech, language and vision,
 - support for breastfeeding moms,
 - interventions to improve low birthweight



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